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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/500,808	07/07/2004	Kunio Ishizaki	1715861	6995

24240 7590 02/02/2006

CHAPMAN AND CUTLER
111 WEST MONROE STREET
CHICAGO, IL 60603

EXAMINER

CHUKWURAH, NATHANIEL C

ART UNIT PAPER NUMBER

3721

DATE MAILED: 02/02/2006

Please find below and/or attached an Office communication concerning this application or proceeding.

Interview Summary	Application No.	Applicant(s)	
	10/500,808	ISHIZAKI, KUNIO	
	Examiner	Art Unit	
	Nathaniel C. Chukwurah	3721	

All participants (applicant, applicant's representative, PTO personnel):

- (1) Nathaniel C. Chukwurah. (3) Jane Berman.
 (2) John Sipos. (4) _____.

Date of Interview: 26 January 2006.

Type: a) ☒ Telephonic b) ☐ Video Conference
 c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☒ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☒ No.
 If Yes, brief description: _____.

Claim(s) discussed: 1.

Identification of prior art discussed: US 5,385,287.

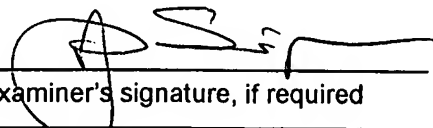
Agreement with respect to the claims f) ☐ was reached. g) ☒ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Applicant pointed out that the applied references do not show movement of the holder laterally of the stapler in response to movement of the staple.
Examiner will reconsider the rejection in view of such an amendment.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.



 Examiner's signature, if required